AMENDMENTS TO THE CLAIMS

1-50. **(Canceled)**

51. **(Currently amended)** A method for inhibiting a humoral immune response in a human comprising administering to the human ~~mammal~~ a pharmaceutical composition comprising an effective amount of a soluble human lymphotoxin-beta receptor (LTβR) fused to one or more heterologous protein domains, wherein the soluble human LTβR comprises ~~comprising~~ at least one ligand binding domain that can selectively bind to a human surface LT ligand, ~~fused to one or more heterologous protein domains~~ and a pharmaceutically acceptable carrier, such that a humoral immune response is inhibited.

52. **(Canceled)**

53. **(Currently amended)** The method according to claim 51, wherein the ligand binding domain comprises SEQ ID NO: 1, or a functional fragment thereof encoding an LTβR ligand binding domain.

54. **(Canceled)**

55. **(Previously presented)** The method according to claim 51, wherein the heterologous protein domain is selected from the group consisting of immunoglobulins, serum albumin, lipoproteins, apolipoproteins, and transferrin.

56. **(Previously presented)** The method according to claim 51, wherein the heterologous protein domain comprises a human immunoglobulin Fc domain.

57-70. **(Canceled)**

71. **(Currently amended)** A method for inhibiting a humoral immune response by inhibiting LT-β receptor signaling without inhibiting TNF-R signaling in a human subject comprising administering to a human subject a pharmaceutical composition comprising an amount of a soluble human lymphotoxin-β receptor (~~LTβ-R~~LTβR) fused to one or more heterologous protein domains, wherein the soluble human LTβR comprises ~~comprising~~ at least one ligand binding domain that can selectively bind to a human surface LT ligand, ~~fused to one or more heterologous protein domains~~ and a pharmaceutically acceptable carrier, such that a humoral immune response is inhibited by inhibiting human LT-β receptor signaling without inhibiting TNF-R signaling.

72. **(Previously presented)** The method according to claim 71, wherein the human subject comprises one or more cells from a mammal.

73-74. **(Canceled)**

75. **(Currently amended)** The method according to claim 71, wherein the ligand binding domain comprises SEQ ID NO: 1, or a functional fragment thereof encoding an LTβR ligand binding domain.

76. **(Canceled)**

77. **(Previously presented)** The method according to claim 71, wherein the heterologous protein domain is selected from the group consisting of immunoglobulins, serum albumin, lipoproteins, apolipoproteins, and transferrin.

78. **(Previously presented)** The method according to claim 71, wherein the heterologous protein domain comprises a human immunoglobulin Fc domain.

79-83. **(Canceled)**

84. **(Currently amended)** A method for disrupting the association of immune complexes and B cell follicles in a human subject comprising administering to the human subject a pharmaceutical composition comprising an amount of a soluble human lymphotoxin-β receptor (~~LTβ-R~~LTβR) fused to one or more heterologous protein domains, wherein the soluble human LTβR comprises ~~comprising~~ at least one ligand binding domain that can selectively bind to a human surface LT ligand, ~~fused to one or more heterologous protein domains~~ and a pharmaceutically acceptable carrier, such that the association of immune complexes and B cell follicles is disrupted.

85. **(Canceled)**

86. **(Currently amended)** The method according to claim 84, wherein the ligand binding domain comprises SEQ ID NO: 1, or a functional fragment thereof encoding an LTβR ligand binding domain.

87. **(Canceled)**

88. **(Previously presented)** The method according claim 84, wherein the heterologous protein domain is selected from the group consisting of immunoglobulins, serum albumin, lipoproteins, apolipoproteins and transferrin.

89. **(Previously presented)** The method according to claim 84, wherein the heterologous protein domain comprises a human immunoglobulin Fc domain.

90-94. **(Canceled)**

95. **(Currently amended)** A method of treating an antibody-mediated autoimmune disorder in a human subject suffering from an autoimmune disorder, comprising administering to the human subject a pharmaceutical composition comprising an effective amount of a soluble human lymphotoxin-β receptor (~~LTβ-R~~LTβR) fused to one or more heterologous protein domains, wherein the soluble human LTβR comprises ~~comprising~~ at least one ligand binding domain that can selectively bind to a human surface LT ligand, ~~fused to one or more heterologous protein domains~~ and a pharmaceutically acceptable carrier, such that the antibody-mediated autoimmune disorder is treated.

96. **(Previously presented)** The method of claim 95, wherein the autoimmune disorder is selected from the group consisting of Myasthenia gravis, autoimmune hemolytic anemia, idiopathic thrombocytopenia purpura (ITP), systemic lupus erythematosus (SLE), Wegener's granulomatosis, poly-arteritis nodosa, and rapidly progressive crescentic glomerulonephritis.

97. **(Previously presented)** The method of claim 95, wherein the autoimmune disorder is a chronic inflammatory disease.

98. **(Previously presented)** The method of claim 97, wherein the chronic inflammatory disease is Chagas' disease or Grave's disease.

99. **(Canceled)**

100. **(Currently amended)** The method according to claim 95, wherein the ligand binding domain comprises SEQ ID NO: 1, or a functional fragment thereof encoding an LTβR ligand binding domain.

101. **(Canceled)**

102. **(Previously presented)** The method according to claim 95, wherein the heterologous protein domain is selected from the group consisting of immunoglobulins, serum albumin, lipoproteins, apolipoproteins, and transferrin.

103. **(Previously presented)** The method according to claim 95, wherein the heterologous protein domain comprises a human immunoglobulin Fc domain.

104. **(Currently amended)** A method of inhibiting a humoral response in a human subject suffering from a hypersensitivity response, comprising administering to the human subject a pharmaceutical composition comprising an effective amount of a soluble human lymphotoxin-β receptor (~~LTβ-R~~LTβR) fused to one or more heterologous protein domains, wherein the soluble human LTβR comprises ~~comprising~~ at least one ligand binding domain that can selectively bind to a human surface LT ligand, ~~fused to one or more heterologous protein domains~~ and a pharmaceutically acceptable carrier, such that a humoral response is inhibited.

105. **(Canceled)**

106. **(Currently amended)** The method according to claim 104, wherein the ligand binding domain comprises SEQ ID NO: 1, or a functional fragment thereof encoding an LTβR ligand binding domain.

107. **(Canceled)**

108. **(Previously presented)** The method according to claim 104, wherein the heterologous protein domain is selected from the group consisting of immunoglobulins, serum albumin, lipoproteins, apolipoproteins, and transferrin.

109. **(Previously presented)** The method according to claim 104, wherein the heterologous protein domain comprises a human immunoglobulin Fc domain.

110. **(Previously presented)** The method of claim 104, wherein the hypersensitivity response is a type I response.

111. **(Previously presented)** The method of claim 104, wherein the hypersensitivity response is a type II or type III response.

112. **(Currently amended)** A method of inhibiting a humoral response associated with graft rejection in a human subject comprising administering a pharmaceutical composition comprising an effective amount of a soluble human lymphotoxin-β receptor (~~LTβ-R~~LTβR) fused to one or more heterologous protein domains, wherein the soluble human LTβR comprises ~~comprising~~ at least one ligand binding domain that can selectively bind to a human surface LT ligand, ~~fused to one or more heterologous protein domains~~ and a pharmaceutically acceptable carrier, such that the humoral immune response associated with graft rejection is inhibited.

113. **(Canceled)**

114. **(Currently amended)** The method according to claim 112, wherein the ligand binding domain comprises SEQ ID NO: 1, or a functional fragment thereof encoding an LTβR ligand binding domain.

115. **(Canceled)**

116. **(Previously presented)** The method according to claim 112, wherein the heterologous protein domain is selected from the group consisting of immunoglobulins, serum albumin, lipoproteins, apolipoproteins, and transferrin.

117. **(Previously presented)** The method according to claim 112, wherein the heterologous protein domain comprises a human immunoglobulin Fc domain.

118. **(Previously presented)** The method according to any of claims 51, 71 or 84, wherein the soluble human lymphotoxin-β receptor (LTβ-R) comprises SEQ ID NO: 1.

119. **(Previously presented)** A method for inhibiting a humoral immune response in a human comprising administering a pharmaceutical composition comprising a soluble human lymphotoxin-beta receptor (LTβR) comprising SEQ ID NO: 1 fused to a human IgG1 Fc domain and a pharmaceutically acceptable carrier, such that the humoral immune response is inhibited.

120. **(Previously presented)** A method for inhibiting a humoral immune response by inhibiting LT-β receptor signaling without inhibiting TNF-R signaling in a human comprising administering a pharmaceutical composition comprising a soluble human lymphotoxin-beta receptor (LTβR) comprising SEQ ID NO: 1 fused to a human IgG1 Fc domain and a pharmaceutically acceptable carrier, such that the humoral immune response is inhibited by inhibiting human LT-β receptor signaling without inhibiting TNF-R signaling.

121. **(Previously presented)** A method for disrupting the association of immune complexes and B cell follicles in a human comprising administering a pharmaceutical composition comprising a soluble human lymphotoxin-beta receptor (LTβR) comprising SEQ ID NO: 1 fused to a human IgG1 Fc domain and a pharmaceutically acceptable carrier, such that the association of immune complexes and B cell follicles is disrupted.